



**ACKNOWLEDGEMENT OF NOTIFICATION  
OF  
HAZARDOUS WASTE ACTIVITY**

Region 2

2/14/2019

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

**EPA I.D. NUMBER:** NYD982719122

**INSTALLATION NAME:** BASF COLORS & EFFECTS USA LLC

**INSTALLATION ADDRESS :** 1057 LOWER S ST  
PEEKSKILL, NY 10566

**MAILING ADDRESS :** 1057 LOWER SOUTH ST  
PEEKSKILL, NY 10566

EPA Form 8700-12 AB (4-80)


**USEPA - REGION 2  
RCRA Programs Branch  
290 Broadway, 22nd Floor  
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS  
Tel : (212) 637-4106  
Fax: (212) 637-4437**

**TO: BASF COLORS & EFFECTS USA LLC  
or Current Occupant**

**ATTN: NICHOLAS SAPONE  
1057 LOWER SOUTH ST  
PEEKSKILL, NY 10566**

updated.

<b>United States Environmental Protection Agency</b> <b>RCRA SUBTITLE C SITE IDENTIFICATION FORM</b>	 2019 JAN 28 A 12:45 RCRA PROGRAMS BRANCH
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1. Reason for Submittal (Select only one.)

<input checked="" type="checkbox"/>	Obtaining or updating an EPA ID number for an on-going regulated activity that will continue for a period of time. (Includes HSM activity)
<input type="checkbox"/>	Submitting as a component of the Hazardous Waste Report for _____ (Reporting Year)
<input type="checkbox"/>	<input type="checkbox"/> Site was a TSD facility and/or generator of > 1,000 kg of hazardous waste, > 1 kg of acute hazardous waste, or > 100 kg of acute hazardous waste spill cleanup in <b>one or more months of the reporting year</b> (or State equivalent LQG regulations)
<input type="checkbox"/>	Notifying that regulated activity is no longer occurring at this Site
<input type="checkbox"/>	Obtaining or updating an EPA ID number for conducting Electronic Manifest Broker activities
<input type="checkbox"/>	Submitting a new or revised Part A Form

2. Site EPA ID Number

N	Y	D	9	8	2	7	1	9	1	2	2
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3. Site Name

<b>BASF Colors &amp; Effects USA LLC</b>
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4. Site Location Address

Street Address <b>1057 Lower South Street</b>	
City, Town, or Village <b>Peekskill</b>	County <b>Westchester</b>
State <b>NY</b>	Country <b>USA</b>
Zip Code <b>10566</b>	

5. Site Mailing Address

☒ Same as Location Address

Street Address		
City, Town, or Village		
State	Country	Zip Code

6. Site Land Type

<input checked="" type="checkbox"/> Private	<input type="checkbox"/> County	<input type="checkbox"/> District	<input type="checkbox"/> Federal	<input type="checkbox"/> Tribal	<input type="checkbox"/> Municipal	<input type="checkbox"/> State	<input type="checkbox"/> Other
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7. North American Industry Classification System (NAICS) Code(s) for the Site (at least 5-digit codes)

A. (Primary) <b>325130</b>	C.
B.	D.

Fed Ex.

Entered 1-28-18

## 8. Site Contact Information

☒ Same as Location Address

First Name	<b>Joseph</b>	MI	<b>J</b>	Last Name	<b>Pagendarm</b>
Title <b>Senior EHS Specialist</b>					
Street Address					
City, Town, or Village					
State		Country		Zip Code	
Email <b>joseph.pagendarm@basf.com</b>					
Phone <b>914-402-3526</b>		Ext		Fax	

## 9. Legal Owner and Operator of the Site

## A. Name of Site's Legal Owner

☐ Same as Location Address

Full Name <b>BASF Corporation</b>		Date Became Owner (mm/dd/yyyy) <b>7/1/2016</b>
Owner Type <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
Street Address <b>100 Park Avenue</b>		
City, Town, or Village <b>Florham Park</b>		
State <b>NJ</b>	Country <b>USA</b>	Zip Code <b>07932</b>
Email		
Phone <b>302-992-5600</b>	Ext	Fax
Comments		

## B. Name of Site's Legal Operator

☐ Same as Location Address

Full Name <b>BASF Colors &amp; Effects USA LLC</b>		Date Became Operator (mm/dd/yyyy) <b>7/1/2016</b>
Operator Type <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
Street Address <b>1209 Orange Street</b>		
City, Town, or Village <b>Wilmington</b>		
State <b>DE</b>	Country <b>USA</b>	Zip Code <b>19801</b>
Email		
Phone <b>302-992-5600</b>	Ext	Fax
Comments		

**10. Type of Regulated Waste Activity (at your site)**

Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed.

**A. Hazardous Waste Activities**

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	1. Generator of Hazardous Waste—If "Yes", mark only one of the following—a, b, c	
<input type="checkbox"/>	a. LQG	-Generates, in any calendar month (includes quantities imported by importer site) 1,000 kg/mo (2,200 lb/mo) or more of non-acute hazardous waste; or - Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lb/mo) of acute hazardous waste; or - Generates, in any calendar month or accumulates at any time, more than 100 kg/mo (220 lb/mo) of acute hazardous spill cleanup material.
<input checked="" type="checkbox"/>	b. SQG	100 to 1,000 kg/mo (220-2,200 lb/mo) of non-acute hazardous waste and no more than 1 kg (2.2 lb) of acute hazardous waste and no more than 100 kg (220 lb) of any acute hazardous spill cleanup material.
<input type="checkbox"/>	c. VSQG	Less than or equal to 100 kg/mo (220 lb/mo) of non-acute hazardous waste.
If "Yes" above, indicate other generator activities in 2 and 3, as applicable.		
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	2. Short-Term Generator (generates from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section.	
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	3. Mixed Waste (hazardous and radioactive) Generator	
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	4. Treater, Storer or Disposer of Hazardous Waste—Note: A hazardous waste Part B permit is required for these activities.	
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	5. Receives Hazardous Waste from Off-site	
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	6. Recycler of Hazardous Waste	
<input type="checkbox"/>	a. Recycler who stores prior to recycling	
<input type="checkbox"/>	b. Recycler who does not store prior to recycling	
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	7. Exempt Boiler and/or Industrial Furnace—If "Yes", mark all that apply.	
<input type="checkbox"/>	a. Small Quantity On-site Burner Exemption	
<input type="checkbox"/>	b. Smelting, Melting, and Refining Furnace Exemption	

**B. Waste Codes for Federally Regulated Hazardous Wastes.** Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g. D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D022					
D002	U002					
D004	U044					
D007						
D009						

**C. Waste Codes for State Regulated (non-Federal) Hazardous Wastes.** Please list the waste codes of the State hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.




**11. Additional Regulated Waste Activities (NOTE: Refer to your State regulations to determine if a separate permit is required.)****A. Other Waste Activities**

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	1. Transporter of Hazardous Waste—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Transporter
<input type="checkbox"/>	b. Transfer Facility (at your site)
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	2. Underground Injection Control
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	3. United States Importer of Hazardous Waste
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	4. Recognized Trader—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Importer
<input type="checkbox"/>	b. Exporter
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	5. Importer/Exporter of Spent Lead-Acid Batteries (SLABs) under 40 CFR 266 Subpart G—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Importer
<input type="checkbox"/>	b. Exporter

**B. Universal Waste Activities**

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) - If “Yes” mark all that apply. Note: Refer to your State regulations to determine what is regulated.
<input type="checkbox"/>	a. Batteries
<input type="checkbox"/>	b. Pesticides
<input type="checkbox"/>	c. Mercury containing equipment
<input type="checkbox"/>	d. Lamps
<input type="checkbox"/>	e. Other (specify) _____
<input type="checkbox"/>	f. Other (specify) _____
<input type="checkbox"/>	g. Other (specify) _____
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	2. Destination Facility for Universal Waste Note: A hazardous waste permit may be required for this activity.

**C. Used Oil Activities**

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	1. Used Oil Transporter—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Transporter
<input type="checkbox"/>	b. Transfer Facility (at your site)
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	2. Used Oil Processor and/or Re-refiner—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Processor
<input type="checkbox"/>	b. Re-refiner
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	3. Off-Specification Used Oil Burner
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	4. Used Oil Fuel Marketer—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
<input type="checkbox"/>	b. Marketer Who First Claims the Used Oil Meets the Specifications

**12. Eligible Academic Entities with Laboratories**—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR 262 Subpart K.

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Opting into or currently operating under 40 CFR 262 Subpart K for the management of hazardous wastes in laboratories—If “Yes”, mark all that apply. Note: See the item-by-item instructions for definitions of types of eligible academic entities.
<input type="checkbox"/>	1. College or University
<input type="checkbox"/>	2. Teaching Hospital that is owned by or has a formal written affiliation with a college or university
<input type="checkbox"/>	3. Non-profit Institute that is owned by or has a formal written affiliation with a college or univer-
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	B. Withdrawing from 40 CFR 262 Subpart K for the management of hazardous wastes in laboratories.

**13. Episodic Generation**

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Are you an SQG or VSQG generating hazardous waste from a planned or unplanned episodic event, lasting no more than 60 days, that moves you to a higher generator category. If “Yes”, you must fill out the Addendum for Episodic Generator.
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**14. LQG Consolidation of VSQG Hazardous Waste**

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Are you an LQG notifying of consolidating VSQG Hazardous Waste Under the Control of the Same Person pursuant to 40 CFR 262.17(f)? If “Yes”, you must fill out the Addendum for LQG Consolidation of VSQGs hazardous waste.
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**15. Notification of LQG Site Closure for a Central Accumulation Area (CAA) (optional) OR Entire Facility (required)**

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	LQG Site Closure of a Central Accumulation Area (CAA) or Entire Facility.
A. <input type="checkbox"/> Central Accumulation Area (CAA) <input type="checkbox"/> Entire Facility	
B. Expected closure date: _____ mm/dd/yyyy	
C. Requesting new closure date: _____ mm/dd/yyyy	
D. Date closed : _____ mm/dd/yyyy	
<input type="checkbox"/>	1. In compliance with the closure performance standards 40 CFR 262.17(a)(8)
<input type="checkbox"/>	2. Not in compliance with the closure performance standards 40 CFR 262.17(a)(8)

**16. Notification of Hazardous Secondary Material (HSM) Activity**

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 260.30, 40 CFR 261.4(a)(23), (24), or (27)? If “Yes”, you must fill out the Addendum to the Site Identification Form for Managing Hazardous Secondary Material.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	B. Are you notifying under 40 CFR 260.43(a)(4)(iii) that the product of your recycling process has levels of hazardous constituents that are not comparable to or unable to be compared to a legitimate product or intermediate but that the recycling is still legitimate? If “Yes”, you may provide explanation in Comments section. You must also document that your recycling is still legitimate and maintain that documentation on site.

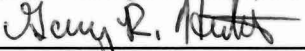
**17. Electronic Manifest Broker**

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Are you notifying as a person, as defined in 40 CFR 260.10, electing to use the EPA electronic manifest system to obtain, complete, and transmit an electronic manifest under a contractual relationship with a hazardous waste generator?
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**18. Comments** (include item number for each comment)

[illegible]

**19. Certification** I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. **Note: For the RCRA Hazardous Waste Part A permit Application, all owners and operators must sign (see 40 CFR 270.10(b) and 270.11).**

Signature of legal owner, operator or authorized representative 	Date (mm/dd/yyyy) 12/20/2018
Printed Name (First, Middle Initial Last) <b>Gary R. Hutchison</b>	Title <b>Site Director</b>
Email <b>gary.hutchison@basf.com</b>	

Signature of legal owner, operator or authorized representative	Date (mm/dd/yyyy)
Printed Name (First, Middle Initial Last)	Title
Email	

## ADDENDUM TO THE SITE IDENTIFICATION FORM: EPISODIC GENERATOR

**ONLY fill out this form if:**

- You are an SQG or VSQG generating hazardous waste from a planned or unplanned episodic event, lasting no more than 60 days, that moves the generator to a higher generator category pursuant to 40 CFR 262 Subpart L. Note: Only one planned and one unplanned episodic event are allowed within one year; otherwise, you must follow the requirements of the higher generator category. Use additional pages if more space is needed.

<b>Episodic Event</b>	
<b>1. Planned</b> <input type="checkbox"/> Excess chemical inventory removal <input type="checkbox"/> Tank cleanouts <input type="checkbox"/> Short-term construction or demolition <input type="checkbox"/> Equipment maintenance during plant shutdowns <input type="checkbox"/> Other _____	<b>2. Unplanned</b> <input type="checkbox"/> Accidental spills <input type="checkbox"/> Production process upsets <input type="checkbox"/> Product recalls <input type="checkbox"/> "Acts of nature" (Tornado, hurricane, flood, etc.) <input checked="" type="checkbox"/> Other <b>Raw Material Off-Spec/Contamination</b>
<b>3. Emergency Contact Phone</b> <b>914-737-2554</b>	<b>4. Emergency Contact Name</b> <b>Joseph J Pagendarm</b>
<b>5. Beginning Date</b> <u>12/20/2018</u> (mm/dd/yyyy)	<b>6. End Date</b> <u>12/20/2018</u> (mm/dd/yyyy)

**Waste 1**

<b>7. Waste Description</b>	<b>8. Estimated Quantity (in pounds)</b>
<b>Ferric chloride solution, corrosive due to HCL, off-spec &amp; unusable</b>	<b>22,000</b>
<b>9. Federal and/or State Hazardous Waste Codes</b>	
<b>D002</b>	

**Waste 2**


<b>7. Waste Description</b>	<b>8. Estimated Quantity (in pounds)</b>
<b>9. Federal and/or State Hazardous Waste Codes</b>	

**Waste 3**

<b>7. Waste Description</b>	<b>8. Estimated Quantity (in pounds)</b>
<b>9. Federal and/or State Hazardous Waste Codes</b>	

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>NYD982719122</b>		2. Page 1 of <b>1</b>		3. Emergency Response Phone <b>908-354-0210</b>		4. Manifest Tracking Number <b>019000549 JJK</b>	
		5. Generator's Name and Mailing Address <b>BASE 1057 Lower South St Deeks Hill, NY 10566 Generator's Phone: 914-402-3476</b>		Generator's Site Address (if different than mailing address) <b>Same NW100137</b>					
6. Transporter 1 Company Name <b>Allstate Power Vac, INC.</b>		U.S. EPA ID Number <b>NYD003812047</b>							
7. Transporter 2 Company Name		U.S. EPA ID Number							
8. Designated Facility Name and Site Address <b>Cycle Chem, INC. 217 S. First St. Elizabeth, NJ 07206 Facility's Phone: 908-355-5800</b>		U.S. EPA ID Number <b>NYD002200046</b>							
<b>GENERATOR</b>	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	<b>X</b>	1. <b>RQ, UN 2582, Waste Ferric Chloride, solution, 8, III</b>			<b>01 TT 2400</b>		<b>G</b>	<b>D002</b>	
		2.							
		3.							
		4.							
14. Special Handling Instructions and Additional Information <b>Document D9968 Sales Order 9064 13 Profile # 53203 Ferric Chloride Solution DOT ERG #154 Truck # P04178 plate # Decal #</b>									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Officer's Printed/Typed Name <b>Dolph M. Dyckman</b>									
Signature <i>[Signature]</i>									
Month Day Year <b>12 20 18</b>									
<b>INT'L</b>	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:								
	Transporter signature (for exports only):								
<b>TRANSPORTER</b>	17. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name <b>Harry Merrill</b>				Signature <i>[Signature]</i>		Month Day Year <b>12 20 18</b>		
	Transporter 2 Printed/Typed Name				Signature		Month Day Year		
<b>DESIGNATED FACILITY</b>	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number:								
	18b. Alternate Facility (or Generator) U.S. EPA ID Number								
	Facility's Phone:								
18c. Signature of Alternate Facility (or Generator) Month Day Year									
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. 2. 3. 4.									
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name Signature Month Day Year									



<b>Cycle Chem, Inc.</b> 217 South First Street Elizabeth, NJ 07206 Phone: (908) 355-5800 Fax: (908) 355-0562	550 Industrial Dr. Lewisberry, PA 17339 Phone: (717) 938-4700 Fax: (717) 938-3301		<b>Material Profile Sheet</b> Generator Number: _____ Product Code: _____ Sales Code: _____
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<b>A. Generator Information</b>			
Generator Name	BASF	Generator USEPA ID	NYD982719122
Mailing Address	1057 Lower South Street		
Site Address	Peekskill, NY 10566		
Generator Contact	Erlick DoRosario	Phone #	914-402-3476 Fax #
Billing Address	Branch		
Billing Contact		Phone #	Fax #

Name of Waste	Ferric Chloride Solution
Process Generating Waste	Tank cleaning

<b>B. Physical Characteristics of Waste</b> Color/Physical Description: <u>Red/brown liquid</u> Specific Gravity: <u>1.1</u> Strong Incidental Odor Present?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No      Wastewater?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Physical State @ 70°: <input checked="" type="checkbox"/> Single Phase <input type="checkbox"/> Multilayered <input type="checkbox"/> Solid <input type="checkbox"/> Semi-solid <input type="checkbox"/> Gas/Aerosol <input type="checkbox"/> Loose Pack <input type="checkbox"/> Bi-layered <input type="checkbox"/> Powder <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Sludge <input type="checkbox"/> Lab Pack  % Sludge <u>0 - 3</u> % Suspended solids _____    % Solid/Debris _____    % Free Liquids <u>95 - 99</u> Dumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No      Pumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No      Pourable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Flashpoint: <input type="checkbox"/> <70° <input type="checkbox"/> 70-100° <input type="checkbox"/> 101-141° <input type="checkbox"/> 142-200° <input checked="" type="checkbox"/> >200° <input checked="" type="checkbox"/> No Flash <input type="checkbox"/> Exact _____ Ignitable Solid: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No pH: <input checked="" type="checkbox"/> <2 <input type="checkbox"/> 2.01-5 <input type="checkbox"/> 5.01-9 <input type="checkbox"/> 9.01-12.4 <input type="checkbox"/> >12.5 <input type="checkbox"/> Exact _____	<b>C. Shipping Information</b> Quantity: <u>2500</u> Units: <u>gallons</u> Price: _____ Container : _____
<b>D. Transport Information</b> <input type="checkbox"/> CCI to Provide Transportation <input type="checkbox"/> Customer to Deliver to CCI <input type="checkbox"/> Customer to Deliver to end facility Via CCI	


<b>E. Chemical Composition</b>		
Description	Range Minimum	Range Maximum
Ferric Chloride solution	10 - 20	
Water	65 - 85	

<b>F. Regulatory Information</b>			
EPA Hazardous Waste?:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    USEPA Code(s): <u>D002</u>		
Applicable Subcategories:			
State Hazardous Waste?:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    State Code(s): _____		
D.O.T. Hazardous Waste?:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    Proper Shipping Name: <u>UN2582 Waste corrosive liquids NOS (Ferric Chloride/water)</u>		
Class: <u>8</u>	I.D. NO: <u>UN2582</u>	P.G.: <u>III</u>	R.Q.: _____

<b>G. Special Handling Considerations</b>			
Project Codes:			
Special Handling:			
Special Handling:			
Special Pricing:			

<b>H. Other Hazardous Characteristics</b>			
<input type="checkbox"/> RCRA Reactive <input type="checkbox"/> Radioactive <input type="checkbox"/> Etiological <input type="checkbox"/> TSCA Regulated <input type="checkbox"/> Pyrophoric <input checked="" type="checkbox"/> None	<input type="checkbox"/> Water Reactive <input type="checkbox"/> Subject to Subpart FF Benzene <input type="checkbox"/> Oxidizing <input type="checkbox"/> Explosive	PCB's <input type="checkbox"/> _____ Cyanides <input type="checkbox"/> _____ Phenolics <input type="checkbox"/> _____ Sulfides <input type="checkbox"/> _____ VOC's <input type="checkbox"/> _____	None x    Actual <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043): <input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined in 40 CFR 268(2)(I) at at concentrations exceeding the UTS treatment standards? If yes, list in section C.			

GENERATOR CERTIFICATION: I hereby certify that all information submitted in this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards in the possession of the generator has been disclosed. If CCI discovers, after having taken delivery of the waste, that any waste does not conform to the identification and description on this MPS then CCI shall provide notice of such condition to the generator and coordinate the return of the non-conforming waste to the point of origin as set forth on the manifest or to such other locations designated in writing by the generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such non-conforming waste to point of origin or to such other location designated by generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted as such to issue any approval.

AUTHORIZED SIGNATURE: 	TITLE: <u>EHS SPECIALIST</u> DATE: <u>12/17/18</u>
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ACV Approval: _____	Signature: _____	Date: _____	Form Code: _____
Printed Name			



Region 2

**ACKNOWLEDGEMENT OF NOTIFICATION  
OF  
HAZARDOUS WASTE ACTIVITY**

09/02/2016

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

**EPA I.D. NUMBER: NYD982719122**

**INSTALLATION NAME: BASF COLORS & EFFECTS USA LLC**

**INSTALLATION ADDRESS : 1057 LOWER SOUTH ST  
PEEKSKILL, NY 10566**

**MAILING ADDRESS : 1057 LOWER SOUTH ST  
PEEKSKILL, NY 10566**

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2  
RCRA Programs Branch  
290 Broadway, 22nd Floor  
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS  
Tel : (212) 637-4106  
Fax: (212) 637-4437**

**TO: BASF COLORS & EFFECTS USA LLC  
or Current Occupant**

**ATTN: NICHOLAS SAPONE  
1057 LOWER SOUTH ST  
PEEKSKILL, NY 10566**



**SEND  
COMPLETED  
FORM TO:**  
The Appropriate  
State or Regional  
Office.

United States Environmental Protection Agency  
**RCRA SUBTITLE C SITE IDENTIFICATION FORM**

ENVIRONMENTAL PROTECTION  
AGENCY REGION II  
8-8 A II: 28  
RCRA PROGRAMS  
BRANCH



**1. Reason for Submittal**  
  
MARK ALL  
BOX(ES) THAT  
APPLY

**Reason for Submittal:**

- ☐ To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)
- ☒ To provide a Subsequent Notification (to update site identification information for this location)
- ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application
- ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # \_\_\_\_\_)
- ☐ As a component of the Hazardous Waste Report (If marked, see sub-bullet below)
- ☐ Site was a TSD facility and/or generator of >1,000 kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)

**2. Site EPA ID Number**

EPA ID Number N Y D 9 8 2 7 1 9 1 2 2

**3. Site Name**

Name: BASF Colors & Effects USA LLC

**4. Site Location Information**

Street Address: 1057 Lower South Street

City, Town, or Village: Peekskill

County: Westchester

State: NY

Country: USA

Zip Code: 10566

**5. Site Land Type**

☒ Private ☐ County ☐ District ☐ Federal ☐ Tribal ☐ Municipal ☐ State ☐ Other

**6. NAICS Code(s) for the Site (at least 5-digit codes)**

A. 3 2 5 1 3 0

C.   

B.   

D.   

**7. Site Mailing Address**

Street or P.O. Box: 1057 Lower South Street

City, Town, or Village: Peekskill

State: NY

Country: USA

Zip Code: 10566

**8. Site Contact Person**

First Name: Nicholas

MI: R

Last: Sapone

Title: Senior EH&S Specialist

Street or P.O. Box: 1057 Lower South Street

City, Town or Village: Peekskill

State: NY

Country: USA

Zip Code: 10566

Email: nicholas.sapone@basf.com

Phone: 302-992-5775

Ext.:

Fax: 914-737-4069

**9. Legal Owner and Operator of the Site**

A. Name of Site's Legal Owner: BASF Colors & Effects USA LLC

Date Became Owner: 7/1/2016

Owner Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Tribal ☐ Municipal ☐ State ☐ Other

Street or P.O. Box: Corporation Trust Center, 1209 Orange Street

City, Town, or Village: Wilmington

Phone: 302-992-5775

State: DE

Country: USA

Zip Code: 19801

B. Name of Site's Operator: BASF Colors & Effects USA LLC

Date Became Operator: 7/1/2016

Operator Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Tribal ☐ Municipal ☐ State ☐ Other

2016 AUG -8 A 11: 28

## 10. Type of Regulated Waste Activity (at your site)

Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed.

## A. Hazardous Waste Activities; Complete all parts 1-10.

Y ☒ N ☐

## 1. Generator of Hazardous Waste

If "Yes," mark only one of the following – a, b, or c.

- ☐ a. LQG: Generates, in any calendar month, 1,000 kg/mo (2,200 lbs/mo.) or more of hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs/mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs/mo) of acute hazardous spill cleanup material.

- ☒ b. SQG: 100 to 1,000 kg/mo (220 – 2,200 lbs/mo) of non-acute hazardous waste.

- ☐ c. CESQG: Less than 100 kg/mo (220 lbs/mo) of non-acute hazardous waste.

If "Yes" above, indicate other generator activities in 2-10.

Y ☐ N ☒

2. Short-Term Generator (generate from a short-term or one-time event and not from on-going processes). If "Yes," provide an explanation in the Comments section.

Y ☐ N ☒

3. United States Importer of Hazardous Waste

Y ☐ N ☒

4. Mixed Waste (hazardous and radioactive) Generator

Y ☐ N ☒

5. Transporter of Hazardous Waste  
If "Yes," mark all that apply.

- ☐ a. Transporter  
☐ b. Transfer Facility (at your site)

Y ☐ N ☒

6. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste Part B permit is required for these activities.

Y ☐ N ☒

7. Recycler of Hazardous Waste

Y ☐ N ☒

8. Exempt Boiler and/or Industrial Furnace  
If "Yes," mark all that apply.

- ☐ a. Small Quantity On-site Burner Exemption  
☐ b. Smelting, Melting, and Refining Furnace Exemption

Y ☐ N ☒

9. Underground Injection Control

Y ☐ N ☒

10. Receives Hazardous Waste from Off-site

## B. Universal Waste Activities; Complete all parts 1-2.

Y ☐ N ☒

1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes," mark all that apply.

- a. Batteries ☐  
b. Pesticides ☐  
c. Mercury containing equipment ☐  
d. Lamps ☐  
e. Other (specify) \_\_\_\_\_ ☐  
f. Other (specify) \_\_\_\_\_ ☐  
g. Other (specify) \_\_\_\_\_ ☐

Y ☐ N ☒

2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

## C. Used Oil Activities; Complete all parts 1-4.

Y ☐ N ☒

1. Used Oil Transporter  
If "Yes," mark all that apply.

- ☐ a. Transporter  
☐ b. Transfer Facility (at your site)

Y ☐ N ☒

2. Used Oil Processor and/or Re-refiner  
If "Yes," mark all that apply.

- ☐ a. Processor  
☐ b. Re-refiner

Y ☐ N ☒

3. Off-Specification Used Oil Burner

Y ☐ N ☒

4. Used Oil Fuel Marketer  
If "Yes," mark all that apply.

- ☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner  
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

**D. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K**

❖ You can ONLY Opt into Subpart K if:

- you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement with a college or university; AND
- you have checked with your State to determine if 40 CFR Part 262 Subpart K is effective in your state

Y ☐ N ☒ 1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories  
See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply:☐ a. College or University☐ b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university☐ c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or universityY ☐ N ☒ 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories**11. Description of Hazardous Waste****A. Waste Codes for Federally Regulated Hazardous Wastes.** Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D002	D003	D004	D005	D006	D007
D008	D009	D011	D022	U002	U044	U220
F003	F005					

**B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes.** Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.


**12. Notification of Hazardous Secondary Material (HSM) Activity**

Y ☐ N ☒ Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)?

If "Yes," you must fill out the Addendum to the Site Identification Form: Notification for Managing Hazardous Secondary Material.

**13. Comments**

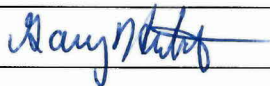
2016 AUG - 8 A 11: 28  
Hazardous Waste Part A Permit Application  
RCRA PROGRAMS  
BRANCH  
ADDITIONAL PROTECTION  
ADDITIONAL REGION II

**14. Certification.** I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).

Signature of legal owner, operator, or an authorized representative

Name and Official Title (type or print)

Date Signed  
(mm/dd/yyyy)



Gary Hutchison, Site Director

08/04/2016





The Chemical Company

ENVIRONMENTAL PROTECTION  
AGENCY, REGION II

2016 AUG -8 A 11: 28

RCRA PROGRAMS  
BRANCH

**VIA OVERNIGHT MAIL**

August 4, 2016

U.S. Environmental Protection Agency - Region 2  
Clean Air and Sustainability Division  
Hazardous Waste Programs Branch  
290 Broadway, 22nd Floor  
New York, NY 10007-1866  
Attn.: RCRA Notifications

**Re: BASF Colors & Effects USA LLC  
Peekskill and Buchanan Sites  
Legal Entity Change – Subsequent Notification  
EPA Form 8700-12**

Dear Sir/Madam:

Please be advised that a legal entity change for the BASF Peekskill and Buchanan Sites occurred on July 1, 2016. Consequently, we have enclosed completed and signed 8700-12 forms to reflect the applicable changes for each site. The legal entity change does not affect any of the production processes or RCRA generator status and the parent company BASF Corporation has not changed.

If you have any questions or require additional information, please don't hesitate to contact me at (302) 992-5775 or [Nicholas.sapone@basf.com](mailto:Nicholas.sapone@basf.com).

Sincerely,

Nicholas R. Sapone  
Sr. EH&S Specialist  
BASF Colors & Effects

Enclosures: 1. EPA Form 8700-12 – Peekskill Site  
2. EPA Form 8700-12 – Buchanan Site



Region 2

# ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

11/07/2006

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

<b>EPA I.D. NUMBER:</b>	<b>NYD982719122</b>
<b>INSTALLATION NAME:</b>	<b>PEEKSKILL PIGMENT FACILITY</b>
<b>INSTALLATION ADDRESS :</b>	<b>1057 LOWER SOUTH ST PEEKSKILL, NY 10566</b>
<b>MAILING ADDRESS :</b>	<b>1057 LOWER SOUTH ST PEEKSKILL, NY 10566</b>

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2**  
**RCRA Programs Branch**  
**290 Broadway, 22nd Floor**  
**New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS**  
**Tel : (212) 637-4106**  
**Fax: (212) 637-3056**

**TO: PEEKSKILL PIGMENT FACILITY**  
**or Current Occupant**  
**ATTN: DENNIS HU**  
**1057 LOWER SOUTH ST**  
**PEEKSKILL, NY 10566**

**SEND COMPLETED****FORM TO:**The Appropriate State or  
EPA Regional Office.

United States Environmental Protection Agency

**RCRA SUBTITLE C SITE IDENTIFICATION FORM****1. Reason for Submittal**  
(See instructions on page 13.)MARK ALL BOX(ES)  
THAT APPLY**Reason for Submittal:**

- ☐ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)
- ☒ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)
- ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application
- ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # \_\_\_\_\_)
- ☐ As a component of the Hazardous Waste Report

**2. Site EPA ID Number** (page 14)**EPA ID Number**

N Y D 9 8 2 7 1 9 1 2 2

**3. Site Name** (page 14)**Name:**

Peekskill Pigment Facility

**4. Site Location Information** (page 14)**Street Address:**

1057 Lower South Street

**City, Town, or Village:**

Peekskill

**State:**

NY

**County Name:**

Westchester

**Zip Code:**

10566

**5. Site Land Type** (page 14)Site Land Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other**6. North American Industry Classification System (NAICS) Code(s) for the Site** (page 14)

A.

B.

C.

D.

**7. Site Mailing Address** (page 15)**Street or P. O. Box:**

1057 Lower South Street

**City, Town, or Village:**

Peekskill

**State:**

NY

**Country:**

US

**Zip Code:**

10566

**8. Site Contact Person** (page 15)**First Name:**

Dennis

**MI:**

J

**Last Name:**

Hu

Phone Number: (914) 737-2554 Extension: 253

Email address: dennis.hu@BASF.com

**9. Operator and Legal Owner of the Site** (pages 15 and 16)**A. Name of Site's Operator:**

BASF Catalysts, LLC

**Date Became Operator (mm/dd/yyyy):**

N/A - name change only

**Operator Type:**☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other**B. Name of Site's Legal Owner:**

BASF Catalysts, LLC

**Date Became Owner (mm/dd/yyyy):**

N/A - name change only

**Owner Type:**☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other



EPA ID NO: NYD 982 719 122

OMB#: 2050-0028 Expires 1/31/2006

9. Legal Owner (Continued) Address	Street or P. O. Box:	100 Campus Drive	
	City, Town, or Village:	Florham Park	
	State:	NJ	
	Country:	US	Zip Code:

## 10. Type of Regulated Waste Activity

Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

## A. Hazardous Waste Activities

Complete all parts for 1 through 6.

Y ☐ N ☐ 1. Generator of Hazardous Waste

If "Yes", choose only one of the following - a, b, or c.

☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.)  
of non-acute hazardous waste; or☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)  
of non-acute hazardous waste; or☐ c. CESQG: Less than 100 kg/mo (220 lbs./mo.)  
of non-acute hazardous waste

In addition, indicate other generator activities.

Y ☐ N ☐ d. United States Importer of Hazardous WasteY ☐ N ☐ e. Mixed Waste (hazardous and radioactive) GeneratorY ☐ N ☐ 2. Transporter of Hazardous WasteY ☐ N ☐ 3. Treater, Storer, or Disposer of

Hazardous Waste (at your site) Note:

A hazardous waste permit is required for  
this activity.Y ☐ N ☐ 4. Recycler of Hazardous Waste (at your  
site)Y ☐ N ☐ 5. Exempt Boiler and/or Industrial  
Furnace

If "Yes", mark each that applies.

☐ a. Small Quantity On-site Burner  
Exemption☐ b. Smelting, Melting, and Refining  
Furnace ExemptionY ☐ N ☐ 6. Underground Injection Control

## B. Universal Waste Activities

Y ☐ N ☐ 1. Large Quantity Handler of Universal Waste (accumulate  
5,000 kg or more) [refer to your State regulations to  
determine what is regulated]. Indicate types of universal  
waste generated and/or accumulated at your site. If "Yes",  
mark all boxes that apply:

	Generate	Accumulate
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

Y ☐ N ☐ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

## C. Used Oil Activities

Mark all boxes that apply.

Y ☐ N ☐ 1. Used Oil Transporter

If "Yes", mark each that applies.

☐ a. Transporter  
☐ b. Transfer FacilityY ☐ N ☐ 2. Used Oil Processor and/or Re-refiner

If "Yes", mark each that applies.

☐ a. Processor  
☐ b. Re-refinerY ☐ N ☐ 3. Off-Specification Used Oil BurnerY ☐ N ☐ 4. Used Oil Fuel Marketer

If "Yes", mark each that applies.

☐ a. Marketer Who Directs Shipment of  
Off-Specification Used Oil to  
Off-Specification Used Oil Burner  
☐ b. Marketer Who First Claims the  
Used Oil Meets the Specifications

EPA ID NO: NYD 982 719 122

OMB#: 2050-0028 Expires 1/31/2006

## 11. Description of Hazardous Wastes (See instructions on page 21.)


**A. Waste Codes for Federally Regulated Hazardous Wastes.** Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.


**B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes.** Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.


**12. Comments (See instructions on page 21.)**

[illegible]

**13. Certification.** I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). (See instructions on page 21.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	DENNIS J. HU, EHS MANAGER	8/15/06



The Chemical Company

ENVIRONMENTAL PROTECTION  
AGENCY, REGION II

2006 AUG 23 AM 9:32

RCRA PROGRAMS  
BRANCH

August 14, 2006

Mr. Jack Hoyt  
US EPA Region II  
Division of Environmental Planning & Protection  
RCRA Permitting Branch  
290 Broadway, 22nd Floor  
New York, New York 10007-1866

Dennis J. Hu  
EHS Manager  
Tel. (914) 737-2554 ext 253  
Fax (914) 734-1929  
[dennis.hu@basf.com](mailto:dennis.hu@basf.com)

**RE: Change in Name Notification for Engelhard Corporation – Peekskill & Buchanan, New York Facilities (Hazardous Waste Permits NYD982719122 and NYD046341400)**

Dear Mr. Hoyt:

This letter is submitted on behalf of Engelhard Corporation (Engelhard) and serves to notify you of a name change and a change in ownership of the stock of Engelhard, the holder of the above-noted permits. Prior to June 9, 2006, Engelhard was a publicly held corporation. As of June 9, 2006, BASF Corporation (BASF), a Delaware corporation headquartered at 100 Campus Drive, Florham Park, NJ 07932, became the sole shareholder of Engelhard. Although Engelhard continues to exist as a separate entity, on or about August 1, 2006, it was converted from a corporation to a limited liability company. Engelhard has also changed its name to BASF Catalysts, LLC.

This change in name affects two Region II facilities, Peekskill (NYD982719122) and Buchanan (NYD046341400). This change in name will also be reflected in the next annual hazardous waste report.

Please disregard the previous letter and attached RCRA form, concerning this subject, sent to you on August 10<sup>th</sup>, 2006. This notification is not a change in ownership, but instead it is for an informational update to alert you of a name change. The RCRA Subtitle C Site Identification Form attached to this letter should be considered accurate and contains the updated information required to capture this recent name change.

Please contact Dennis Hu, EHS Manager at (914) 737-2554 ext. 253 or Scott Clearwater, EHS Director at (732) 205-6965 if you have any questions.

Regards,

Dennis J. Hu  
BASF Catalysts, LLC  
[dennis.hu@basf.com](mailto:dennis.hu@basf.com)

Cc: File  
Attachments

BASF Catalysts LLC  
1050/1057 Lower South Street  
Peekskill, NY 10566 USA

Telephone: 914-737-2554  
After-hours Telephone: 914-226-2554  
Emergency Telephone: 914-293-8911  
Fax: 914-734-1929



<b>SEND COMPLETED FORM TO:</b> The Appropriate State or EPA Regional Office.	United States Environmental Protection Agency <b>RCRA SUBTITLE C SITE IDENTIFICATION FORM</b>			REGIONAL PROTECTION AGENCY, REGION II 2006 AUG 15 PM 2:01 RCRA PROGRAMS BRANCH
<b>1. Reason for Submittal</b> (See instructions on page 13.)  MARK ALL BOX(ES) THAT APPLY	<b>Reason for Submittal:</b> <input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) <input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #_____) <input type="checkbox"/> As a component of the Hazardous Waste Report			
<b>2. Site EPA ID Number</b> (page 14)	EPA ID Number NYD982719122			
<b>3. Site Name</b> (page 14)	Name: Peekskill Pigment Facility			
<b>4. Site Location Information</b> (page 14)	Street Address: 1057 Lower South Street City, Town, or Village: Peekskill State: New York County Name: Westchester Zip Code: 10566			
<b>5. Site Land Type</b> (page 14)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			
<b>6. North American Industry Classification System (NAICS) Code(s) for the Site</b> (page 14)	A. 325131 B. C. D.			
<b>7. Site Mailing Address</b> (page 15)	Street or P. O. Box: 1057 Lower South Street City, Town, or Village: Peekskill State: New York Country: USA Zip Code: 10566			
<b>8. Site Contact Person</b> (page 15)	First Name: Dennis MI: J Last Name: Hu Phone Number: 914-737-2554 Extension: 253 Email address: dennis.hu@BASF.com			
<b>9. Operator and Legal Owner of the Site</b> (pages 15 and 16)	A. Name of Site's Operator: BASF Corporation Date Became Operator (mm/dd/yyyy): 06/09/2006 Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other B. Name of Site's Legal Owner: BASF Corporation Date Became Owner (mm/dd/yyyy): 06/09/2006 Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			

EPA ID NO: NYD 982 719 122

OMB#: 2050-0028 Expires 1/31/2006

9. Legal Owner (Continued) Address	Street or P. O. Box:	100 Campus Drive	
	City, Town, or Village:	Flochan Park	
	State:	New Jersey	
	Country:	USA	Zip Code:

## 10. Type of Regulated Waste Activity

Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

## A. Hazardous Waste Activities

Complete all parts for 1 through 6.

Y ☐ N ☐ 1. Generator of Hazardous Waste

If "Yes", choose only one of the following - a, b, or c.

- ☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.)  
of non-acute hazardous waste; or
- ☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)  
of non-acute hazardous waste; or
- ☐ c. CESQG: Less than 100 kg/mo (220 lbs./mo.)  
of non-acute hazardous waste

In addition, indicate other generator activities.

Y ☐ N ☐ d. United States Importer of Hazardous WasteY ☐ N ☐ e. Mixed Waste (hazardous and radioactive) GeneratorY ☐ N ☐ 2. Transporter of Hazardous WasteY ☐ N ☐ 3. Treater, Storer, or Disposer of

Hazardous Waste (at your site) Note:

A hazardous waste permit is required for  
this activity.Y ☐ N ☐ 4. Recycler of Hazardous Waste (at your  
site)Y ☐ N ☐ 5. Exempt Boiler and/or Industrial  
Furnace

If "Yes", mark each that applies.

- ☐ a. Small Quantity On-site Burner  
Exemption
- ☐ b. Smelting, Melting, and Refining  
Furnace Exemption

Y ☐ N ☐ 6. Underground Injection Control

## B. Universal Waste Activities

- Y
- ☐
- N
- ☐
1. Large Quantity Handler of Universal Waste (accumulate
- 
- 5,000 kg or more) [refer to your State regulations to
- 
- determine what is regulated]. Indicate types of universal
- 
- waste generated and/or accumulated at your site. If "Yes",
- 
- mark all boxes that apply:

	Generate	Accumulate
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

Y ☐ N ☐ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

## C. Used Oil Activities

Mark all boxes that apply.

Y ☐ N ☐ 1. Used Oil Transporter

If "Yes", mark each that applies.

- ☐ a. Transporter
- ☐ b. Transfer Facility

Y ☐ N ☐ 2. Used Oil Processor and/or Re-refiner

If "Yes", mark each that applies.

- ☐ a. Processor
- ☐ b. Re-refiner

Y ☐ N ☐ 3. Off-Specification Used Oil BurnerY ☐ N ☐ 4. Used Oil Fuel Marketer

If "Yes", mark each that applies.

- ☐ a. Marketer Who Directs Shipment of  
Off-Specification Used Oil to  
Off-Specification Used Oil Burner
- ☐ b. Marketer Who First Claims the  
Used Oil Meets the Specifications

OMB#: 2050-0028 Expires 1/31/2006


hazardous wastes  
7, U112). Use an

hazardous wastes  
(7, U112). Use an




[illegible]

**13. Certification.** I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). **(See instructions on page 21.)**

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	Dennis J. Hu, EHS Manager	8/10/06





The Chemical Company

ENVIRONMENTAL PROTECTION  
AGENCY, REGION II

2006 AUG 15 PM 2: 01

RCRA PROGRAMS  
BRANCH

August 10, 2006

Mr. Jack Hoyt  
US EPA Region II  
Division of Environmental Planning & Protection  
RCRA Permitting Branch  
290 Broadway, 22nd Floor  
New York, New York 10007-1866

Dennis J. Hu  
EHS Manager  
Tel. (914) 737-2554 ext 253  
Fax (914) 734-1929  
[dennis.hu@basf.com](mailto:dennis.hu@basf.com)

**RE: Change of Ownership Notification for Engelhard Corporation – Peekskill & Buchanan, New York Facilities (Hazardous Waste Permits NYD982719122 and NYD046341400)**

Dear Mr. Hoyt:

This letter is submitted on behalf of Engelhard Corporation (Engelhard) and serves to notify you of a name change and a change in ownership of the stock of Engelhard, the holder of the above-noted permits. Prior to June 9, 2006, Engelhard was a publicly held corporation. As of June 9, 2006, BASF Corporation (BASF), a Delaware corporation headquartered at 100 Campus Drive, Florham Park, NJ 07932, became the sole shareholder of Engelhard. Although Engelhard continues to exist as a separate entity, on or about August 1, 2006, it was converted from a corporation to a limited liability company. Engelhard has also changed its name to BASF Catalysts, LLC.

This change of ownership affects two Region II facilities, Peekskill (NYR982719122) and Buchanan (NYR046341400). This change of ownership will also be reflected in the next annual hazardous waste report. Please find enclosed the RCRA Subtitle C Site Identification Forms for these two facilities. Only the site identification information has been submitted for both facilities.

Please contact Dennis Hu, EHS Manager at (914) 737-2554 ext. 253 or Scott Clearwater, EHS Director at (732) 205-6965 if you have any questions.

Regards,

Dennis J. Hu  
BASF Catalysts, LLC  
[dennis.hu@basf.com](mailto:dennis.hu@basf.com)

Cc: File

Attachments

BASF Catalysts LLC  
1050/1057 Lower South Street  
Peekskill, NY 10566 USA

Telephone: 914-737-2554  
After-hours Telephone: 914-226-2554  
Emergency Telephone: 914-293-8911  
Fax: 914-734-1929



# RCRA Site Detail

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## NYD982719122 ENGELHARD CORPORATION-PIGMENT OPERATIONS

EPA Region 02 Extract Flag: Y Facility Identifier: County: WESTCHESTER

Basic Notes: EXTRACT\_FLAG UPDATED OCT 2003 VIA SQL

Universes Generator: LQG Transporter: N Active: Y  
Operating TSDF: ---- IC In Place: N EI Indicator (HE / GW): N / N

Activity Location: NY Source Type: Biennial Report Seq. Number: 4 Receive Date: 28 FEB 2004 Report Cycle: 2003

Other/Previous Site Name: ENGELHARD CORPORATION-PIGMENT OPERATIONS

Location LOWER SOUTH ST  
Address PEEKSKILL, NY 10566

Mailing Address: LOWER SOUTH ST  
PEEKSKILL, NY 10566  
UNITED STATES

Contact Person DENNIS J. HU UNITED STATES  
For Source (914) 737-2554 ext. 253  
Information DENNIS.HU@ENGELHARD.COM

Owner (current) WOOD AVE Type: Private  
ENGELHARD CORPORATION ATTN: ENV DEPT  
From: 02/10/2000 To: ISELIN, NJ 08830-0770  
ISELIN Phone:

Operator (current) WOOD AVE Type: Private  
ENGELHARD CORPORATION ATTN: ENV DEPT  
From: 02/10/2000 To: ISELIN, NJ 08830-0770  
ISELIN Phone:

Land Type: Private Non Notifier: No Commercial Availability: Unknown Tsd Date:  
Accessibility: No. Employees: State District:  
NAICS Codes: 325131 Inorganic Dye and Pigment Manufacturing

Notes: NY

### Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Large Quantity Generator; State: NY-1 Large Quantity Generator

Transfer Facility:

### Used Oil Activities

Other Hazardous Waste Generator Activities		Used Oil Transporter Activity		Off-Specification Used Oil Burner:	No
Importer Activity:	No	Transporter:	No	Used Oil Fuel Marketer Activity	
Mixed Waste Generator:	No	Transfer Facility:	No	Marketer who directs shipment	
Transporter Activity:	No	Used Oil Processor and/or		off-specification used oil to	
TSD Activity:	No	Re-refiner Activity		off-specification used oil burner:	No
Recycler Activity:	No	Processor:	No	Marketer who first claims the used	
		Refiner:	No	oil meets the specifications:	No
Exempt Boiler and/or Industrial Furnace		Underground		Destination Facility for	
Small Quantity Onsite Burner Exemption:	No	Injection Control:		Universal Waste:	No
Smelting, melting, Refining Furnace					
Exemption:	No				

### Universal Waste Activities:

Description	Generated	Accumulated
Batteries	N	N
Lamps	N	N
Pesticides	N	N
Thermostats	N	N

Description of Hazardous Wastes (as reported on Site Identification Form)

EPA Waste Codes: D001, D002, D007, D008, D009, D011, D022, D035, D039, U002, U151

### Biennial Report Information

Total Quantity Reported (Tons): Generated: 7 Managed: 0 Shipped: 7 Received: 0

### Top 10 GM Forms Summary by Largest Quantity of Hazardous Waste Generated (All quantities are in tons)

Generated	Managed	Onsite Management Methods	Shipped	Offsite Management Methods
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# RCRA Site Detail

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## NYD982719122 ENGELHARD CORPORATION-PIGMENT OPERATIONS

Continued...

### Top 10 GM Forms Summary - continued (All quantities are in tons)

Generated	Managed	Onsite Management Methods	Shipped	Offsite Management Methods
3	0	WASTE LACQUERS & SOLVENTS FROM QUALITY CONTROL OPERATIONS		3 H141 - STORAGE, BULKING AND/OR TRANSFER OFF SITE
EPA Waste Codes: D001, D002, D022				
2	0	WASTE CORROSIVE SOLIDS (NITRIC ACID AND HYDROCHLORIC ACID SOLUTIONS)		2 H141 - STORAGE, BULKING AND/OR TRANSFER OFF SITE
EPA Waste Codes: D002				
0	0	WASTE COMBUSTIBLE LIQUIDS FROM PARTS CLEANER, NAPHTHA PETROLEUM WASTE.		0 H141 - STORAGE, BULKING AND/OR TRANSFER OFF SITE
EPA Waste Codes: D001				

Activity Location: NY Source Type: Biennial Report Seq. Number: 3 Receive Date: 30 OCT 2002 Report Cycle: 2001

Other/Previous Site Name: ENGELHARD CORPORATION

Location PEEKSKILL PIGMENTS PLANT  
Address: 1057 LOWER SOUTH ST  
PEEKSKILL, NY 10566

Mailing Address: 1057 LOWER SOUTH ST 1057  
LOWER SOUTH ST  
PEEKSKILL, NY 10566  
UNITED STATES

Contact Person DANIEL D. ROUTHIER  
For Source (914) 737-2554 ext. 261 UNITED STATES  
Information

Geometric Type Code: Horizontal Collection Method: Reference Point Code:  
Horizontal Accuracy Measure: Horizontal Reference Datum: Source Map Scale Numbers: 0

Land Type: Bad code - X Non Notifier: No Commercial Availability: Unknown Tsd Date:  
Accessibility: No. Employees: 0 State District: NYSDEC R3

NAICS Codes: 325131 Inorganic Dye and Pigment Manufacturing

Notes: Update 10/03 to ensure Leg\_Dist is associated with correct Counties

### Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Large Quantity Generator; State: NY-1 Large Quantity Generator

Transfer Facility:

### Used Oil Activities

Other Hazardous Waste Generator Activities		Used Oil Transporter Activity	Off-Specification Used Oil Burner:	Unknown
Importer Activity:	No	Transporter:	Unknown	
Mixed Waste Generator:	No	Transfer Facility:	Unknown	
Transporter Activity:	Unknown	Used Oil Processor and/or	Used Oil Fuel Marketer Activity	
TSD Activity:	No	Re-refiner Activity	Marketer who directs shipment	
Recycler Activity:	Unknown	Processor:	off-specification used oil to	
		Refiner:	off-specification used oil burner:	Unknown
Exempt Boiler and/or Industrial Furnace			Marketer who first claims the used	
Small Quantity Onsite Burner Exemption:	Unknown		oil meets the specifications:	Unknown
Smelting, melting, Refining Furnace		Underground	Destination Facility for	
Exemption:	Unknown	Injection Control:	Universal Waste:	Unknown

### Universal Waste Activities:

Description	Generated	Accumulated
Batteries	U	U
Lamps	U	U
Pesticides	U	U
Thermostats	U	U

### Biennial Report Information

Total Quantity Reported (Tons): Generated: 50 Managed: 0 Shipped: 50 Received: 0

### Top 10 GM Forms Summary by Largest Quantity of Hazardous Waste Generated (All quantities are in tons)

Generated	Managed	Onsite Management Methods	Shipped	Offsite Management Methods
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# RCRA Site Detail

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## NYD982719122 ENGELHARD CORPORATION-PIGMENT OPERATIONS

Continued...

### Top 10 GM Forms Summary - continued (All quantities are in tons)

Generated	Managed	Onsite Management Methods	Shipped	Offsite Management Methods
WASTE LACQUERS AND SOLVENTS FROM QUALITY CONTROL OPERATIONS	7	0		7 H141 - STORAGE, BULKING AND/OR TRANSFER OFF SITE
EPA Waste Codes: D001, D002				
WASTE HYDROCHLORIC ACID - OFF SPEC. MATERIAL	1	0		1 H141 - STORAGE, BULKING AND/OR TRANSFER OFF SITE
EPA Waste Codes: D002				
WASTE COMBUSTIBLE LIQUID (PARTS CLEANER), NAPTHA (PETROLEUM)				
G09: WASTE FROM PARTS CLEANER	0	0		0 H141 - STORAGE, BULKING AND/OR TRANSFER OFF SITE
EPA Waste Codes: D018, D039, D040				

Activity Location: NY Source Type: Notification Seq. Number: 3 Receive Date: 21 MAY 2002

Other/Previous Site Name: ENGELHARD CORP - PEEKSKILL PIGMENTS PLT

Location 1057 LOWER SOUTH ST  
Address: PEEKSKILL, NY 10566

Mailing Address: 1057 LOWER SOUTH ST  
PEEKSKILL, NY 10566  
UNITED STATES

Contact Person DAN ROUTHIER 1057 LOWER SOUTH ST  
For Source (914) 737-2554 PEEKSKILL, NY 10566  
Information UNITED STATES

Owner (current) 101 WOOD AVE Type: Private  
ENGELHARD CORP ISELIN, NJ 08830-0770 Phone: (737) 205-5000  
From: 01/01/0001 To:  
Geometric Type Code: Horizontal Collection Method: Reference Point Code:  
Horizontal Accuracy Measure: Horizontal Reference Datum: Source Map Scale Numbers: 0

Land Type: Private Non Notifier: No Commercial Availability: Unknown Tsd Date:  
Accessibility: No. Employees: 0 State District: NYSDEC R3

Notes: Update 10/03 to ensure Leg\_Dist is associated with correct Counties

### Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Large Quantity Generator; State:

Transfer Facility:

### Used Oil Activities

### Other Hazardous Waste Generator Activities

Importer Activity: Unknown  
Mixed Waste Generator: Unknown  
Transporter Activity: No  
TSD Activity: Yes  
Recycler Activity: No

### Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption: Unknown  
Smelting, melting, Refining Furnace  
Exemption: Unknown

### Used Oil Transporter Activity

Transporter: No  
Transfer Facility: No

### Used Oil Processor and/or Re-refiner Activity

Processor: No  
Refiner: No

### Underground Injection Control:

No

### Off-Specification Used Oil Burner:

No

### Used Oil Fuel Marketer Activity

Marketer who directs shipment  
off-specification used oil to  
off-specification used oil burner:

No

Marketer who first claims the used  
oil meets the specifications:

No

### Destination Facility for Universal Waste:

No

Description of Hazardous Wastes (as reported on Site Identification Form)

EPA Waste Codes: D001, D002, D003, D004, D005, D007, D008, D009, D011, D018, D022, D039, D040, K006, K007, P030, U002, U031, U069, U088, U102, U112, U119, U151, U154, U159, U161, U162, U196, U220, U239

Activity Location: NY Source Type: Biennial Report Seq. Number: 2 Receive Date: 01 JAN 2001 Report Cycle: 1999

Other/Previous Site Name: ENGELHARD CORP

Location PEEKSKILL PIGMENTS PLANT  
Address: 1057 LOWER SOUTH ST  
PEEKSKILL, NY 10566

Mailing Address: PEEKSKILL PIGMENTS PLANT  
1057 LOWER SOUTH ST  
PEEKSKILL, NY 10566

# RCRA Site Detail

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## NYD982719122 ENGELHARD CORPORATION-PIGMENT OPERATIONS

Continued...

**Contact Person** GREGORY DAUM  
For Source (914) 737-2554 ext. 381  
Information

Land Type: Bad code - U Non Notifier: No Commercial Availability: Other - U Tsd Date:  
Accessibility: No. Employees: State District: NYSDEC R3  
NAICS Codes: 325131 Inorganic Dye and Pigment Manufacturing

Notes: Update 10/03 to ensure Leg\_Dist is associated with correct Counties

### Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Large Quantity Generator; State:

Transfer Facility: Unknown

### Used Oil Activities

Other Hazardous Waste Generator Activities

Used Oil Transporter Activity

Off-Specification Used Oil Burner:

Unknown

Importer Activity: Unknown  
Mixed Waste Generator: Unknown

Transporter: Unknown  
Transfer Facility: Unknown

Used Oil Fuel Marketer Activity

Transporter Activity: Unknown  
TSD Activity: No  
Recycler Activity: Unknown

Used Oil Processor and/or  
Re-refiner Activity

Marketer who directs shipment  
off-specification used oil to  
off-specification used oil burner:

Unknown

Processor: Unknown  
Refiner: Unknown

Marketer who first claims the used  
oil meets the specifications:

Unknown

Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption: Unknown  
Smelting, melting, Refining Furnace  
Exemption: Unknown

Underground  
Injection Control: Unknown

Destination Facility for  
Universal Waste:

Unknown

### Biennial Report Information

Total Quantity Reported (Tons): Generated: 10 Managed: 0 Shipped: 10 Received: 0

### Top 10 GM Forms Summary by Largest Quantity of Hazardous Waste Generated (All quantities are in tons)

Generated	Managed	Onsite Management Methods	Shipped	Offsite Management Methods
3	0	WASTE LACQUERS AND SOLVENTS FROM QUALITY CONTROL OPERATIONS	3	H050 - ENERGY RECOVERY
EPA Waste Codes: D001, D022				
2	0	LAB PACK-CLEAN OUT OF OLD LAB CHEMICALS	2	H040 - INCINERATION
EPA Waste Codes: D001, D002, D005, D007, P022, U144, U218				
1	0	FOURESCENT BULBS	1	H010 - METALS RECOVERY
EPA Waste Codes: D009				

Activity Location: NY Source Type: Notification Seq. Number: 2 Receive Date: 06 OCT 2000

Other/Previous Site Name: ENGELHARD CORP - PEEKSKILL PIGMENTS PLT

Location 1057 LOWER SOUTH ST  
Address: PEEKSKILL, NY 10566

Mailing 1057 LOWER SOUTH ST  
Address: PEEKSKILL, NY 10566

Land Type: Private Non Notifier: No Commercial Availability: Other - U Tsd Date:  
Accessibility: No. Employees: State District: NYSDEC R3

Notes: Update 10/03 to ensure Leg\_Dist is associated with correct Counties

# RCRA Site Detail

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## NYD982719122 ENGELHARD CORPORATION-PIGMENT OPERATIONS

Continued...

### Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Not a Generator; State: HQ-N Not a Generator

Transfer Facility: Unknown

### Used Oil Activities

Other Hazardous Waste Generator Activities

Used Oil Transporter Activity

Off-Specification Used Oil Burner:

No

Importer Activity: Unknown

Transporter: No

Used Oil Fuel Marketer Activity

Mixed Waste Generator: Unknown

Transfer Facility: No

Marketer who directs shipment  
off-specification used oil to  
off-specification used oil burner:

No

Transporter Activity: Yes

Used Oil Processor and/or  
Re-refiner Activity

TSD Activity: Yes

Processor: No

Marketer who first claims the used  
oil meets the specifications:

No

Recycler Activity: No

Refiner: No

Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption: Unknown

Underground  
Injection Control:

No

Destination Facility for  
Universal Waste:

Smelting, melting, Refining Furnace  
Exemption: Unknown

Activity Location: NY Source Type: Implementer Seq. Number: 1 Receive Date: 14 JUL 1999

Other/Previous Site Name: ENGELHARD CORP - PEEKSKILL PIGMENTS PLT

Location 1057 LOWER SOUTH ST  
Address: PEEKSKILL, NY 10566

Mailing 1057 LOWER SOUTH ST  
Address: PEEKSKILL, NY 10566

Land Type: Private

Non Notifier: No

Commercial Availability: Other - U

Tsd Date:

Accessibility:

No. Employees:

State District: NYSDEC R3

Notes: Update 10/03 to ensure Leg\_Dist is associated with correct Counties

### Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Small Quantity Generator; State:

Transfer Facility: Unknown

### Used Oil Activities

Other Hazardous Waste Generator Activities

Used Oil Transporter Activity

Off-Specification Used Oil Burner:

No

Importer Activity: Unknown

Transporter: No

Used Oil Fuel Marketer Activity

Mixed Waste Generator: Unknown

Transfer Facility: No

Marketer who directs shipment  
off-specification used oil to  
off-specification used oil burner:

No

Transporter Activity: Yes

Used Oil Processor and/or  
Re-refiner Activity

TSD Activity: Yes

Processor: No

Marketer who first claims the used  
oil meets the specifications:

No

Recycler Activity: No

Refiner: No

Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption: Unknown

Underground  
Injection Control:

No

Destination Facility for  
Universal Waste:

Smelting, melting, Refining Furnace  
Exemption: Unknown

Activity Location: NY Source Type: Implementer Seq. Number: 2 Receive Date: 15 MAR 1993

Other/Previous Site Name: ENGELHARD CORP - PEEKSKILL PIGMENTS PLT

Location 1057 LOWER SOUTH ST  
Address: PEEKSKILL, NY 10566

Mailing 1057 LOWER SOUTH ST  
Address: PEEKSKILL, NY 10566

Land Type: Private

Non Notifier: No

Commercial Availability: Other - U

Tsd Date:

Accessibility:

No. Employees:

State District: NYSDEC R3

Notes: Update 10/03 to ensure Leg\_Dist is associated with correct Counties



# RCRA Site Detail

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## NYD982719122 ENGELHARD CORPORATION-PIGMENT OPERATIONS

Continued...

### Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Large Quantity Generator; State:

Transfer Facility: Unknown

### Used Oil Activities

Other Hazardous Waste Generator Activities

Used Oil Transporter Activity

Off-Specification Used Oil Burner:

No

Importer Activity: Unknown

Transporter: No

Used Oil Fuel Marketer Activity

Mixed Waste Generator: Unknown

Transfer Facility: No

Marketer who directs shipment  
off-specification used oil to  
off-specification used oil burner:

No

Transporter Activity: Yes

Used Oil Processor and/or  
Re-refiner Activity

TSD Activity: No

Processor: No

Marketer who first claims the used  
oil meets the specifications:

No

Recycler Activity: No

Refiner: No

Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption: Unknown

Underground  
Injection Control:

No

Destination Facility for  
Universal Waste:

Smelting, melting, Refining Furnace  
Exemption: Unknown

Activity Location: NY Source Type: Biennial Report Seq. Number: 1 Receive Date: 24 FEB 1992 Report Cycle: 1991

Other/Previous Site Name: MEARL CORP

Location 1057 LOWER SOUTH STREET  
Address: PEEKSKILL, NY 10566

Mailing 1057 LOWER SOUTH STREET  
Address: PEEKSKILL, NY 10566

Contact Person TERRY R HUGHES  
For Source (914) 737-2554 ext. 273  
Information

Land Type: Bad code - U Non Notifier: No Commercial Availability: Other - U Tsd Date:

Accessibility: No. Employees: State District: NYSDEC R3

NAICS Codes: 325131 Inorganic Dye and Pigment Manufacturing

Notes: Update 10/03 to ensure Leg\_Dist is associated with correct Counties

### Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Large Quantity Generator; State:

Transfer Facility: Unknown

### Used Oil Activities

Other Hazardous Waste Generator Activities

Used Oil Transporter Activity

Off-Specification Used Oil Burner:

Unknown

Importer Activity: Unknown

Transporter: Unknown

Used Oil Fuel Marketer Activity

Mixed Waste Generator: Unknown

Transfer Facility: Unknown

Marketer who directs shipment  
off-specification used oil to  
off-specification used oil burner:

Unknown

Transporter Activity: Unknown

Used Oil Processor and/or  
Re-refiner Activity

TSD Activity: Yes

Processor: Unknown

Marketer who first claims the used  
oil meets the specifications:

Unknown

Recycler Activity: Unknown

Refiner: Unknown

Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption: Unknown

Underground  
Injection Control:

Unknown

Destination Facility for  
Universal Waste:

Unknown

Smelting, melting, Refining Furnace  
Exemption: Unknown

### Biennial Report Information

Total Quantity Reported (Tons): Generated: 5 Managed: 0 Shipped: 5 Received: 0

### Top 10 GM Forms Summary by Largest Quantity of Hazardous Waste Generated (All quantities are in tons)

Generated	Managed	Onsite Management Methods	Shipped	Offsite Management Methods
-----------	---------	---------------------------	---------	----------------------------

ANALYTICAL LABORATORY QUALITY CONTROL SAMPLES, IGNITABLE; AN

2

0

2 H050 - ENERGY RECOVERY

EPA Waste Codes: D001, D022

RESEARCH & DEVELOPMENT LABORATORY; RESEARCH, PROCESS CONTROL

0

0

0 H050 - ENERGY RECOVERY

EPA Waste Codes: D001

# RCRA Site Detail

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## NYD982719122 ENGELHARD CORPORATION-PIGMENT OPERATIONS

Continued...

### Top 10 GM Forms Summary - continued (All quantities are in tons)

Generated	Managed	Onsite Management Methods	Shipped	Offsite Management Methods
0	0	BISMUTH OXYCHLORIDE PIGMENT IN IGNITABLE ORGANICS	0	H061 - FUEL BLENDING
EPA Waste Codes: D001				
0	0	DILUTE WASTEWATER WITH PB FROM 1990 STORAGE CLOSURE	0	H077 - OTHER CHEMICAL PRECIPITATION
EPA Waste Codes: D008				

Activity Location: NY Source Type: Part A Seq. Number: 1 Receive Date: 19 NOV 1980

Other/Previous Site Name: ENGELHARD CORP - PEEKSKILL PIGMENTS PLT

Location 1057 LOWER SOUTH ST  
Address: PEEKSKILL, NY 10566

Mailing Address: 1057 LOWER SOUTH ST  
PEEKSKILL, NY 10566

Contact Person ROBERT EBERTS 1057 LOWER SOUTH STREET  
For Source (914) 737-2554 PEEKSKILL, NY 10566  
Information

Operator (current) 1057 LOWER SOUTH STREET Type: Private  
THE MEARL CORPORATION OPERCITY, NY 99999  
From: To: Phone: (914) 737-2554

Land Type: Private Non Notifier: No Commercial Availability: Other - U Tsd Date:  
Accessibility: No. Employees: State District: NYSDEC R3  
NAICS Codes: 325131 Inorganic Dye and Pigment Manufacturing

Notes: Update 10/03 to ensure Leg\_Dist is associated with correct Counties

### Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Not a Generator; State: HQ-N Not a Generator

Transfer Facility: Unknown

### Used Oil Activities

Other Hazardous Waste Generator Activities	Used Oil Transporter Activity	Off-Specification Used Oil Burner:	No
Importer Activity: Unknown	Transporter: No	Used Oil Fuel Marketer Activity	
Mixed Waste Generator: Unknown	Transfer Facility: No	Marketer who directs shipment off-specification used oil to off-specification used oil burner:	No
Transporter Activity: No	Used Oil Processor and/or Re-refiner Activity	Marketer who first claims the used oil meets the specifications:	No
TSD Activity: Yes	Processor: No		
Recycler Activity: No	Refiner: No		
Exempt Boiler and/or Industrial Furnace	Underground Injection Control: No	Destination Facility for Universal Waste:	
Small Quantity Onsite Burner Exemption: Unknown			
Smelting, melting, Refining Furnace Exemption: Unknown			

### Other Permits:

Number	Description	Owner	Type	Type Description
NYT370010266		US	R	RCRA (Hazardous waste)

Description of Hazardous Wastes (as reported on Site Identification Form)

EPA Waste Codes: D001, D002, D008, K006, K007

Activity Location: NY Source Type: Notification Seq. Number: 1 Receive Date: 14 AUG 1980

Other/Previous Site Name: ENGELHARD CORP - PEEKSKILL PIGMENTS PLT

Location 1057 LOWER SOUTH ST  
Address: PEEKSKILL, NY 10566

Mailing Address: 1057 LOWER SOUTH ST  
PEEKSKILL, NY 10566

Land Type: Private Non Notifier: No Commercial Availability: Other - U Tsd Date:  
Accessibility: No. Employees: State District: NYSDEC R3



# RCRA Site Detail

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## NYD982719122 ENGELHARD CORPORATION-PIGMENT OPERATIONS

Continued...

Notes: Update 10/03 to ensure Leg\_Dist is associated with correct Counties

### Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Large Quantity Generator; State:

Transfer Facility: Unknown

### Used Oil Activities

#### Other Hazardous Waste Generator Activities

Importer Activity: Unknown  
Mixed Waste Generator: Unknown

#### Used Oil Transporter Activity

Transporter: No  
Transfer Facility: No

#### Off-Specification Used Oil Burner:

No

Transporter Activity: Yes

#### Used Oil Processor and/or Re-refiner Activity

Processor: No  
Refiner: No

#### Used Oil Fuel Marketer Activity

Marketer who directs shipment  
off-specification used oil to  
off-specification used oil burner:

No

TSD Activity: Yes

Recycler Activity: No

Marketer who first claims the used  
oil meets the specifications:

No

#### Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption: Unknown  
Smelting, melting, Refining Furnace  
Exemption: Unknown

Underground  
Injection Control: No

Destination Facility for  
Universal Waste:

\* End of Report \*